



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: ) Atty. Docket NL 000372  
Elise A. Walthera Hendrina Van Den Hoven, et al) )  
Serial No. 09/868,749 ) Group Art Unit:  
 ) 2173  
Filed: 06/20/2001 ) ) Examiner:  
TITLE: DEVICE AND METHOD OF BROWSING ) Kieu D. Vu  
AN IMAGE COLLECTION ) )  
 )  
 )

Mail Stop: Amendment  
Commissioner for Patents  
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Dear Sir:

In response to the Office Action dated March 25, 2004, the Applicants submit the following Amendment and Remarks for the above referenced application.



PTO/SB/21 (02-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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(to be used for all correspondence after initial filing)

		Application Number	09/868,749
		Filing Date	06/20/2001
		First Named Inventor	Elise Van Den Hoven
		Art Unit	2173
		Examiner Name	Kieu D. Vu
Total Number of Pages in This Submission	15	Attorney Docket Number	NI 000372

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)	
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):	
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
<input type="text"/> Remarks Enclosed is to an Office Action, a one mont extention and a redlined drawing sheet.			

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James D. Leimbach, Reg. No. 34,374
Signature	
Date	July 24, 2004

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Typed or printed name	James D. Leimbach
Signature	
Date	July 24, 2004

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